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Florida Department of State
Division of Corporations
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To:
Division of Corporations
Fax Number : (850)617-6381

From:
Account Name : C T CORPORATION SYSTEM
Account Number : FCA000000023
Phone : (850)222-1092
Fax Number : (850)878-5368

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: _____

FLORIDA PROFIT/NON PROFIT CORPORATION

PRESENTATION PLUS, INC.

Certificate of Status	0
Certified Copy	1
Page Count	02
Estimated Charge	$78.75

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12/12/13

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TALLAHASSEE, FLORIDA

ARTICLES OF INCORPORATION
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME
The name of the corporation shall be: Presentations Plus, Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address	Mailing address, if different is:
7082 Villa Lantana Way	
Naples, Fl. 34108	

ARTICLE III PURPOSE
The purpose for which the corporation is organized is:

The purpose of the corporation is to engage in any lawful act or activity for which corporations may be organized under the corporation laws of the State of Florida.

ARTICLE IV SHARES
The number of shares of stock is: 200 No Par Value

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Naomi Wexler Buck, President
Address: 7082 Villa Lantana Way, Naples, Fl. 34108

Name and Title:
Address:

Name and Title:
Address:

Name and Title:
Address:

Name and Title:
Address:

Name and Title:
Address:

ARTICLE VI REGISTERED AGENT
The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: Naomi Wexler Buck
Address: 7082 Villa Lantana Way, Naples, Fl. 34108

ARTICLE VII INCORPORATOR
The name and address of the Incorporator is:

Name: Naomi Wexler Buck
Address: 7082 Villa Lantana Way, Naples, Fl. 34108

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

Naomi Wexler Buck — 12/10/13
Required Signature/Registered Agent — Date

I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

Naomi Wexler Buck — 12/10/13
Required Signature/Incorporator — Date

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